

AMENDMENTS TO THE CLAIMS

This listing of claims will replace all prior versions and listings of claims in the application:

Claim 26 (previously presented): A method for reducing electrical disturbance of a cell's resting membrane potential comprising administering to the cell an effective amount of a composition comprising an effective amount of a local anaesthetic and of one or more of a potassium channel opener, an adenosine receptor agonist, an anti-adrenergic, a calcium antagonist, an opioid, an NO donor and a sodium hydrogen exchange inhibitor.

Claim 27 (previously presented): A method for reducing damage to a cell, tissue or organ following ischaemia comprising administering to the cell, tissue or organ an effective amount of a composition comprising an effective amount of a local anaesthetic and of one or more of a potassium channel opener, an adenosine receptor agonist, an anti-adrenergic, a calcium antagonist, an opioid, an NO donor and a sodium hydrogen exchange inhibitor.

Claim 28 (previously presented): A method for preconditioning a cell or tissue during ischaemia or reperfusion comprising administering an effective amount of a composition comprising an effective amount of a local anaesthetic and of one or more of a potassium channel opener, an adenosine receptor agonist, an anti-adrenergic, a calcium antagonist, an opioid, an NO donor and a sodium hydrogen exchange inhibitor.

Claim 29 (previously presented): A method for reducing damage to a cell, organ or tissue before, during and following a surgical or clinical intervention comprising administering to the cell, organ or tissue an effective amount of a composition comprising an effective amount of a local anaesthetic and of one or more of a potassium channel opener, an adenosine receptor agonist, an anti-adrenergic, a calcium antagonist, an opioid, an NO donor and a sodium hydrogen exchange inhibitor.

Claim 30 (previously presented): A method according to claim 27 wherein the anti-adrenergic is selected from beta-blockers, such as esmolol, atenolol, metoprolol and propranolol and alpha(1)-adrenoceptor-antagonists such as prazosin.

Claim 31 (previsouly presented): A method according to claim 27 wherein the opioid is selected from enkephalins, endorphins and dynorphins, preferably an enkephalin which targets delta, kappa and/or mu receptors.

Claim 32 (previously presented): A method according to claim 27 wherein the opioid is a delta opioid receptor agonist.

Claim 33 (previously presented): A method according to claim 27 wherein the calcium antagonist is selected from Amlodipine, nifedipine, nicardipine, nimodipine, nisoldipine, lercanidipine, telodipine, angizem, altiazem, bepridil, amlodipine, felodipine, mibefradil, isradipine, caverio, Bay K 8644(L-type)(1,4-dihydro-26-dimethyl-5-nitro-[2(trifluoromethyl)phenyl]-3-pyridine carboxylic acid (methyl ester)), calciseptine (L-type), omega-conotoxin GVIA (N-type), omega-conotoxin MVIIC (Q-type), cyproheptadine HCl, dantrolene sodium, diltiazem HCl (L-type), flodipine, flunarizine HCl ($\text{Ca}^{2+}/\text{Na}^{+}$), fluspirilene (L-type), HA-1077 2HCl(1-(5 isoquinoliny) sulphonyl) homo piperazine.HCl), isradipine, loperamide HCl, manoalide, niguldipine HCl (L-type), nitrendipine (L-type), pimozone (L- and T-type), ruthenium red, ryanodine (SR channels), taicatoxin, verapamil HCl (L-type), Azelnidipine (L-type) methoxy-verapamil HCl (L-type), YS-035 HCl (L-type)N[2(3,4-dimethoxyphenyl)ethyl]-3,4-dimethoxy N-nethyl benzene ethaneamine HCl) and calcium antagonists with AV blocking actions, such as verapamil.

Claim 34 (previously presented): A method according to claim 27 wherein NO donor is either nitric-oxide synthase independent (such as nitroprusside, nitro-glycerine, flurbiprofen or its NO-donating derivative, HCT1026 (2-fluoro-a-methyl[1,1'-biphenyl]-4-acetic acid and 4-(nitrooxy)butyl ester) or nitric-oxide synthase dependent (such as regulator calcium calmodulin and L-arginine).

Claim 35 (previously presented): A method according to claim 27 wherein the sodium hydrogen exchange inhibitor is selected from amiloride, cariporide, eniporide, triamterene and EMD 84021, EMD 94309, EMD 96785, HOE 642 and T-162559.

Claim 36 (previously presented): A method according to claim 27 wherein the cell is a myocyte, endothelial cell, smooth-muscle cell, neutrophil, platelet and other inflammatory cells, or the tissue is heart tissue or vasculature, or the organ is a heart.

Claim 37 Cancelled.

Claim 38 (previously presented): A method according to claim 27 wherein the composition further comprises one or more of an antioxidant, ionic magnesium, an impermeant and a metabolic substrate.

Claim 39 (previously presented): A method according to claim 27 wherein the composition has been oxygenated.

Claim 40 (previously presented): A method according to claim 27 comprising administering the composition as part of a medicament including the composition and a blood-based or crystalloid carrier.

Claim 41 (previously presented): A method according to claim 40 wherein the medicament has concentrations of one or more of sodium, calcium and chloride lower than physiological concentrations.

Claim 42 (previously presented): A method according to claim 40 wherein the medicament has concentrations of one or more of sodium, calcium and chloride that have been adjusted from blood physiological concentrations.

Claim 43 (previously presented): A method according to claim 27 wherein the composition is at a temperature of profound hypothermia (0 to 4 degrees Celsius),

moderate hypothermia (5 to 20 degrees Celsius), mild hypothermia (20 to 32 degrees Celsius) or normothermia (32 to 38 degrees Celsius).

Claim 44 (previously presented): A method according to claim 27 wherein the components of the medicament or composition are combined before administration or when the components are administered substantially simultaneously or co-administered.

Claim 45 (previously presented): Use of a composition or medicament according to claim 27 for treatment of a subject in need thereof.